946

PLACE OF BIRTH
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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 138
Co. Registrar's No. 157
Local Registrar's No.

(No. St; Ward)

ULL NAME OF CHILD
f child is not named, make Supplemental Report on blank obtainable from local registrar.

Born Alive: YES ~~NO~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month / Day / Yr.)
Male				Yes	4 / 12 / 1919

FATHER		MOTHER	
Full Name	D.J. Sullivan	Full Maiden Name	Irene Kirby
Residence	Ice House Canon	Residence	Ice House Canon
Color or Race	White	Color or Race	White
Age at last Birthday	31 Years	Age at last Birthday	19 Years
Birthplace	Michigan	Birthplace	Arizona
Occupation	Miner	Occupation	Housewife

Number of child of this Mother 2 | Number of Children, of this mother, now living 2 | Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on 4/12 1919, at 4,30 A.M.

*When there is no attending physician or midwife, then the householder should make this return.

Signature L. E. Wyllinen
Attending physician, ~~midwife, householder.~~*

Address Globe. Arizona.

Given or Christian name added from a supplemental report 191

Filed 4-16 1919 B. G. Fox
LOCAL REGISTRAR.

025-412-928
COUNTY REGISTRAR.

A True Copy

Filed 6-6 1919 B. G. Fox
COUNTY REGISTRAR.